

ISA Application Form



To apply for any type of cash ISA with The Cambridge

PLEASE USE BLOCK CAPITALS TO COMPLETE THIS FORM. ALL FIELDS WITH * ARE REQUIRED

You and The Cambridge

Are you an existing member of The Cambridge?* Yes No

An account number with The Cambridge

I apply to subscribe to a cash ISA for the tax year 20 /20 and each subsequent year until further notice
(subject to the product special terms and conditions).

I would like to invest £ into a (type of account e.g. Instant Access ISA)

Issue number

For minimum and maximum investment limits, please see the relevant terms and conditions for your chosen product and our ISA Booklet.

Source of funds

Transfer existing cash ISA

I would like to transfer £ from an existing cash ISA with The Cambridge.

Account number

I would like to transfer £ from another ISA provider

Please complete an ISA Transfer Form for each ISA provider

Applicant Details

Your name

Title *

Forename(s) *

Surname *

Applicant Details (continued)

Your personal information

Date of birth*

Country of birth*

Place of birth*

Gender*

Marital status*

National Insurance number*

UK residency

Are you a permanent UK resident?* Yes No

Are you currently a UK resident?* Yes No

Do you have a UK bank account?* Yes No

Your address

Address*

Postcode*

Date moved to current address* (MM/YYYY)

If you have moved to your current address within the last three months please provide your previous house number or name, postcode and the date you moved to this address

House number and postcode

Date moved to previous address (MM/YYYY)

Owner with/without mortgage Renting Living with relatives/friends Other

Nationality / tax

What is your nationality?*

Do you have dual nationality?* Yes No

If yes, please state your second nationality

What is your country of residence for tax purposes?*

Applicant Details (continued)

Nationality / tax (continued)

Do you have dual residency for tax purposes and/or are you a US citizen?* Yes No

If yes, please state your second residency for tax purposes

If you are not solely British for tax purposes please detail your Taxpayer Identification Number or other tax reference number

Contact details

Mobile phone number*

Email address*

Home phone number

Work phone number

Employment status*

(e.g. Full time, Part time, Student)

If employed, what is your occupation?

Keeping you informed

Preferred telephone number:

Home Work Mobile

Occasionally we would like to contact you about products and services from The Cambridge we think may be of interest to you.

Would you like to receive these communications?

Yes

No

How would you like to be contacted:

Phone Yes No

Post Yes No

Email Yes No

SMS Yes No

Financial Services Compensation Scheme (FSCS)

I have received a copy of the Financial Services Compensation Scheme information sheet

It's important that you read the FSCS information sheet. It provides information about the protection of your savings deposits. If you need a copy of the information sheet or more information please ask in store or call 0345 601 3344.

Interest Instructions

Interest will be automatically added to the account, unless specified. If you require interest to be paid into a different bank or building society account, please ask in store or call 0345 601 3344.

Nominated Bank Account

You can send faster payments from your savings account to your UK current bank account. You'll just need to set up a nominated account with us by filling in the details below.

Account number

Sort code

Bank name

Account holder's name

Identification requirements

When you open an account with us, under regulations for prevention and detection of financial crime, we need to verify your name and address. We use an electronic verification system to do this. In certain cases we will need further proof of your identity in order to open your account. To find out which forms of identification are suitable visit cambridgebs.co.uk/VerifyingYourID or ask for a copy of our 'Verifying your identity' leaflet in store or over the phone.

Special requirements

If you have any additional support requirements, such as receiving communications in large print or you need someone to help manage your account, please tick this box and a member of our team will be in contact with you to discuss your requirements.

Declaration

1. All subscriptions made, and to be made, belong to me
2. I am 16 or 17 years old and I have not subscribed, and will not subscribe, to another cash ISA in the same tax year in which I subscribe to this cash ISA or;
I am 18 years of age or over and I have not subscribed, and will not subscribe, to more than the overall ISA subscription limit total in the same tax year
3. I have not subscribed, and will not subscribe, to another cash ISA with The Cambridge in the same tax year in which I subscribe to this cash ISA
4. I have not subscribed / made a payment to and will not subscribe / make a payment more than the overall subscription limit in total to any combination of permitted ISA types in the same tax year
5. I am resident and ordinarily resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of the Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with, a person who performs such duties. I will inform The Cambridge Building Society if I cease to be so resident and ordinarily resident or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties
6. I accept the terms and conditions applicable to Individual Savings Accounts
7. I agree to be bound by the Rules of the Society available upon request
8. I agree that The Cambridge may use my information as stated in the Privacy Policy
9. This application form has been completed to the best of my knowledge and belief

I authorise The Cambridge Building Society:

1. To hold my cash subscriptions along with interest and to claim any relief from tax on my behalf

Before signing this application form please check that you have completed all the required fields marked with * and that you have carefully read the terms and conditions associated with the product you're applying for. If you do not understand any point please ask for further information.

Please sign here

Applicant

Date